## 11000083785

| (Re                     | equestor's Name)   |           |
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| Certified Copies        | _ Certificates     | of Status |
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| Special Instructions to | Filing Officer     |           |
| opeoidi mendenene te    | Timing Officer.    |           |
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DIVISION OF CORPORATION

t. Hampton

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EXAMINER

## **COVER LETTER**

| TO:          | Registration Se<br>Division of Con |  | ,  |   |
|--------------|------------------------------------|--|--|---|
| SUBJE        | 4°<br>CCT•                         | 2207                                       | Trump, LLC   |   |
|              |                                    |  | ited Liability Company   |   |
| The end      | closed Articles of                 | Amendment and fee(s) are sul               | bmitted for filing.  |   |
| Please 1     | return all correspo                | ondence concerning this matter             | to the following:  |   |
|              |                                    |  | Jose L. Lozada   | <del> </del>  |
|              |                                    |  | Name of Person   |   |
|              |                                    |  | Firm/Company   |   |
| ·            |                                    | ·  | 18422 NE 27th Court  |   |
|              |                                    | A۱   | ventura, Florida 33160°  |   |
|              |                                    |  | City/State and Zip Code  |   |
|              |                                    | E-mail address: (                          | FreemanPA@aol.com to be used for future annual report notifi     | cation)   |
| For furt     | her information o                  | concerning this matter, please of          | eall:  |   |
|              | Dennis                             | B. Freeman, P.A.                           | at ( 305 )   | 682-8500  |
|              | Name o                             | of Person                                  | Area Code & Daytime  | e Telephone Number  |
| Enclose      | ed is a check for t                | he following amount:                       |  |   |
| <b>₹</b> 25. | 00 Filing Fee                      | \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed |

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO SECRETARY OF STATE ARTICLES OF ORGANIZATION DIVISION OF CORPORATIONS OF 11 AUG 26 PM 12: 02

2207 Trump, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ 7/21/2011 and assigned L11000083785 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 2207 Lozada Condo, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Zip Code City

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

| MGR = Ma<br>MGRM = N | nager<br>Managing Member                |  |                          |
|----------------------|---|--|--------------------------|
| <u>Title</u>         | <u>Name</u>                             | Address  | Type of Action           |
|                      | <del> </del>                            |  | Add<br>Remove            |
|                      |   |  | ☐ Add<br>☐ Remove        |
|                      |   |  | Add<br>Remove            |
|                      | <del></del>                             |  | Add<br>Remove            |
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|                      |   |  | Add<br>Remove            |
| D. If amend          | ling any other information, enter chang | ge(s) here: (Attach additional sheets, if necessary.)              |                          |
|                      |   |  | SECRETARY OF CORF        |
| Dated                | 8 2511                                  |  | RY OF STATE CORPORATIONS |
|                      | 1 FUNISE                                | or authorized representative of a member OF printed name of signee |                          |

Page 2 of 2

Filing Fee: \$25.00